

Dysentaria

Dysintory

By Robert B. Honeyman of Virg.

/ passed March 14. 1816 /

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Dr Robert D. Livingston of N.Y.
Before March 14 1862

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The Dysentery (which will form the subject of the following essay) has, in all ages, and in most countries, engaged the attention, and occupied the labours of the most eminent medical authors; and with great reason, as being a disease of so frequent occurrence; so extensive and general in its ravages at certain seasons; so distressing in its symptoms; and often so fatal in its termination.

But although the number of writers on this disease is very great; many of them, of great merit; generally known, and generally read; yet, as the disease will probably have a conspicuous share of the attention, and study of the medical practitioner; every hint, every notice, every attempt, (even this feeble one) to illustrate the subject, may be of some avail; if not to inform the judgment, yet to refresh the memory.

Though the Dysentery prevails occasionally, with

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great malignity, in the northern and eastern sections of this wide, extended Republic, still the southern States, from their climate and other causes, are particularly susceptible to the ravages of this disease; as in those regions the return of the Dysentery, in the Summer and Autumn, in a greater or less degree, is as certain as the return of the seasons themselves. It therefore behoves all, who purpose to exercise the medical art in those countries, to study, with particular care, the nature and treatment of this formidable malady.

It is likewise peculiarly incumbent on those, whose destination it is to serve their country in a medical capacity, to endeavour to attain a perfect knowledge of the causes, symptoms, and treatment of the Dysentery; as being (among the diseases to which soldiers are liable) by far the most frequent, and fatal; never failing, in a greater or less degree, to appear on their taking the field, especially in the Summer; and continuing to increase in frequency, and malignity, till checked by the coldness of the seasons; and

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not infrequently have the devastations of this disease alone, been so general, that they have weakened whole armies to such a degree, during the most important season of military operations, as to frustrate the best concerted plans of their commanders.

As the Dysentery is commonly an epidemic disease, and as (like other epidemics) its nature and symptoms vary considerably in different years, so that the successful treatment of the disease in one year may prove inefficacious in a succeeding one; and as, even in the same epidemic, the remedy at the commencement must often be changed or modified as the season advances; the judgment of the Physician is here called upon for its fullest exercise; to determine from a careful examination of the symptoms, the several indications, and the most appropriate remedies.

And though many authors have given descriptions of epidemic Dysenteries, which come under their observation, with their manner of treating them, yet as the nature and appearance of epidemic diseases are so vari-

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able, the principal dependence for successful treatment, must be the attentive observation, and the maturely weighed judgment of the Physician. So that the contracted limits of this essay will be confined to a general account of the disease, as it appears commonly, either sporadic or epidemic; its symptoms, and causes, together with the treatment, which has generally been found most successful.

This disease frequently commences with chillings, and shivering, succeeded by heat and other symptoms of pyrexia; but in a majority of cases, the local complaint appears first, and the febrile symptoms come on soon after.

The symptoms, which characterize this affection, and point out its nature most manifestly, are the following: costiveness and flatulency, which are often considerable; there are severe griping pains, an almost continual tenesmus; the stools are frequent, but the discharges are very inconsiderable, and the matter voided, is various both in colour, and consistence; in some instances, it consists of mucus, and then the disease is called *Dysenteria Alba*, or *morbus mu-*

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case: In other instances, the mucus is often streaked with blood, and sometimes blood is voided nearly pure, and then it is denominated *Dysenteria Cruentata*. Thus the morologists distinguish, by different denominations, two distinct varieties of the disease, which have no other distinguishing mark, except the appearance of the stools; for the causes, symptoms, and methods of cure, in the cases that I have seen, were exactly similar in both instances; and the only varieties, that require different modes of treatment, are, in my opinion, such as are marked by the different forms, which the attendant fever assumes, as the Inflammatory, the Bilious, remittent, and the Typhoid. In some cases of this disease, the matter voided is bilious; Doctor Cullen says, it is sometimes pure; but it is found likewise to be composed of a putrid sanies, as also, of a membrane like sicc. Some writers assert, that besides the mucus, and together with it, there is a watery or serous fluid discharged.

Even after the commencement of the disease, the patient feels an uneasiness about the stomach; the appetite fails; there is nausea: vomiting frequently follows

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and the matter thrown up is various:— in most cases, it is bilious but in some instances it is mucous or bloody; the skin is dry, and parched; there is great thirst; the tongue is dry and covered with a thick mucus; there is great prostration of strength; the spirits are much depressed. Optha sometimes appears; Hiccup becomes troublesome, and when these two last symptoms come on, at an advanced stage of the disease, it generally proves fatal. Towards the close of the disease, there is often delirium, also convulsions and faintings; in some cases a Synergy takes place, and there is, sometimes, a total suppression of urine. Borborigmi are frequent, and the Abdomen is tender.

The fever, which almost invariably attends, is, for the most part, Intermittent or Remittent; but in some instances, it is highly Inflammatory; and in others it is truly Typhoid.

The febrile symptoms frequently continue throughout the whole course of the disease; in other cases their duration is but short, leaving behind the local complaint, which, when thus left alone, continues for

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some considerable time; all the symptoms being present except the fever.

The natural faeces are generally retained, and are never voided, except in dysbala or balls, which, when discharged, alleviate all the symptoms, and particularly the griping and tenesmus. In some instances, a Præputia Ani is produced by straining violently at stool.

The duration of this disease is various. If the symptoms are high; if the debility be great; attended by a low and feeble pulse, and if the stools be fetid and involuntary, it generally terminates fatally in a few days: while on the other hand, if the symptoms be moderate, it is often protracted to a considerable length of time, when the fever goes off alone, the disease is, generally, of long continuance, lasting many weeks, and even months.

It sometimes ceases spontaneously; the frequency of the stools, the griping and tenesmus gradually diminish, while the natural faeces return: in other instances, the symptoms moderate, and the disease changes into a Dysbala: it is also in some cases, transformed into Leucorrhœa.

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Numerous are the opinions respecting the Primary Cause of this affection, or that peculiar action in which it consists. Some suppose it to consist in a certain irritation of the Intestines, particularly of the lower portion: others imagine that it consists in an inflammatory affection of the various membrane of the Intestines: but Doct^r Gullen says, it depends upon a post-natural constriction of the colon, by which the faeces are retained, and formed into Scybala corresponding to the cells of that Intestine, and from the relief almost invariably obtained by a discharge of these Scybala, it is probable that, in many cases such a constriction does exist, and, in my opinion, there is also an inflammatory affection of the lining membrane of the Intestines, and, in some cases, the disease is purely an inflammation of this membrane.

Dysentery generally appears in summer and autumn, when the atmosphere becomes moist, after being very warm and dry. Cool and moist air

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applied to the body relaxed, and rendered irritable by the heat of the Summer, suddenly stops the perspiration, and determines the circulating fluids to the internal parts; and, in this way, Autumnal Dysenteries are produced.

Dysentery arises from the same causes, that produce other fevers: Marsh miasma is a frequent cause; also *Idie miasma*. It does uncontestedly arise, in many instances, from the mere application of cold, without any peculiar state of the atmosphere; and when it proceeds from this cause, I coincide with Doctor Barton and others, in considering it not contagious; but if the attendant fever be of the Typhoid kind, it is then contagious, and its combination with this form of fever is, in my opinion, the only circumstance, which renders it so. But, although the simple Dysenteric fever cannot be communicated by contagion, the disease, nevertheless, may be propagated by the effluvia arising from the feces, and other impurities of the persons diseased.

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On dissections, to discover what effects this complaint has had on the system, and what changes it has produced in the structure of particular parts, we find the internal coat of the Intestines (particularly of the Colon and Rectum) affected with inflammation, and its consequences, such as ulceration, Gangrene, and contractions. The peritonaeum is, in some instances, inflamed: the liver and Spleen are often diseased, particularly the former, and especially in warm climates we sometimes find it much softer than natural: in some cases it is enlarged or indurated, and again, but rarely, an abscess is formed in its substance:—the gall-bladder is often distended:—the spleen is either enlarged, or diminished.

In the cure of this disease, if the patient be plethoric, the fever inflammatory, and the pulse full and strong, venesection will be necessary, and should be practised in the earliest stage of the disease: the blood should be drawn pretty copiously; and when drawn under such circumstances, it always exhibits the inflamed

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mentary matter, but unless the inflammatory symptoms
run very high, and the indication for bleeding be very
manifest, we should be cautious in repeating the op-
eration of venesection, as the fever is apt, in the course
of the disease, to assume the Typhoid type. Such cau-
tion is necessary, particularly in the Fall; at which
season Dysentery is, most commonly epidemic; but
in the Spring Dysenteries, which are often highly in-
flammatory, repeated bleedings are frequently neces-
sary.

Soon after the commencement of this complaint,
on the first or second day, an emetic, in most cases,
should be given, and if bile be present in the Stool, or
if the fever be of the Typhoid type, it becomes abso-
lutely necessary, and may be considered among the best
remedies for the cure of this disease. The emetic gen-
erally used, and best adapted, are Irtogised Antimony
and Spessanther, the latter of which is to be preferred.
It should be given alone, in small doses, frequently re-
peated, by which means, it often operates as a Laxative.

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in many instances the effects of the *Opacur*, are such, as are produced by no other medicine. It produces a relaxation in the Intestinal coats, and obtains the acrimony of our fluids, thereby alleviating the griping pains, which are frequently almost insupportable. -X

If the medicine should not produce a plentiful discharge by the bowels, we must, on the following day, have recourse to some cathartic medicine. The medicines belonging to this class, are certainly the most important in the cure of this disease; indeed, in almost every instance, they are indispensably necessary to bring away the natural faeces, which have become hard, and are moulded or imparted in the cells of the Colon. The oleum ricini is best adapted in the mild forms of the disease, when the constipation is slight; it is said by some authors, to soothe the internal coat of the Intestines from the acrimony of its contents; in my opinion the quantity generally given is too small to have this effect, but that being of a mild and laxative nature, it brings

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In similar cases, and for the same purposes, I have known fresh butter and lard to be given, when the oleum ricini was not at hand: they were equally as efficacious as the oil, and being of a less stimulating nature, it would appear that they are preferable. But when the symptoms are violent, and the constipation obstinate, more active cathartics are required, such as the Sulphate of Soda, Senega, and Calomel with Rhubarb or Salap.

Calomel with Rhubarb, is very useful, and if bile or worms be present, it is the best cathartic we can administer, since it dislodges them effectually.

The Sulphate of Soda, combined with Tartarised Antimony, given frequently and in small doses, is often very beneficial: it relaxes, and cools the parts, and brings on a discharge of the natural feces but if the stomach be weak, and the fever in

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flavourless, the Supertartrate of Potash is very proper
as a purgative: it strengthens the stomach, has a cooling
effect, and does not produce the flatulency, which so fre-
quently follows the operation of the other neutral salts.

Morley's vitriolic solution, given frequently, is
often of great service.

Glysters are of infinite service, in almost every
case of Spasmodic; being, generally, of a mucilaginous
quality, they obviate, in a great degree, the irritation
produced by the hardened faeces, they loosen the con-
striction of the Intestines, and thereby facilitate, and
promote the discharge of their contents. The substances
most suitable for making injections, are the infusions
of barley, rice, starch, and flax-seeds with Gum
arabic is also useful. These substances should be inject-
ed frequently in the course of the day, and if the
Intestines be irritable, a small quantity of Laudanum
should be added to each portion to be injected.

After proper evacuations have been employed, small
doses of some Diaphoretic should be given, in order to dis-

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terminate the circulation to the surface of the body. The diaphoretic not adapted, if there still remain heat and febrile action, is the tartarised antimony given in small doses; but in general, there is very little fever, and the Dover's powder is to be preferred; it subdues the irritability of the Intestines, and brings on a gentle diaphoresis.

At night, after the operation of the purgative, if the griping pains be violent, and the restlessness considerable, an opiate should be given; but unless these symptoms are present and urgent, opiates should not be administered until the first passages are cleared, and all inflammatory action subsides: after these objects have been obtained, in every instance, opiates are useful and necessary. Some writers consider Hyoscyamus preferable to opium, as having, in addition to the anodyne power of the opium, a laxative quality.

In obstinate cases, blisters applied to the ankles, wrists, legs, and arms, by producing a revulsion from the Intestines, are often of much benefit. when the ge-

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ping pains are severe, and the constriction remains, the warm bath and emicupium sometimes afford relief. Fomentations and blisters to the abdomen, are, in many cases, infinitely beneficial. Flannel moistened in a decoction of camemile flowers, poppy-heads, or camphorated spirit, and applied over the Abdomen, often relieves effectually the constriction and the griping pains.

A mercurial action, brought on by some mild preparation of mercury, has, in some instances, cured this disease, after other remedies had failed, but unless this action be quickly excited, we should desist from the use of mercury, since a long continued use of it, sometimes produces alarming consequences.

Nitric acid is frequently used in warm climates, as a remedy for Dysentery. Some writers suppose it to be valuable, and much safer than mercury.

A regular diet should be observed in this disease, and such food is best adapted, as not only af-

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foods nourishment, without stimulating the system in any great degree, but at the same time, defends the inner coat of the intestines, from the acid matter it contains: for this purpose we should advise rice, barley, arrowroot and the like. The drinks should be mucilaginous: toast and water, and whey are also suitable: indeed, it is said, that some cases of the most obstinate Dysenteries, have been cured, by confining the patient to the use of warm water, and allowing him nothing else, except opiate, when the gripes were severe. ~~Only the form of the~~

When the fever subsides, and the other symptoms of Acute Dysentery go off; but the discharge continues frequent, owing to the debility and laxity of the intestines, astringents and tonics become necessary: as the most mild, and one that is generally efficacious, I shall mention the cold bath: it invigorates the whole system; determines the circulating fluids to the surface, and produces a gentle diaphoresis.

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The preparations of Iron, being useful in all diseases proceeding from a debilitated state of the digestive organs, are particularly adapted to ^{the} chronic forms of Dysentery; they are sometimes, the only medicines, that will restore the tone of the Intestines.

In some particular cases of Chronic Dysentery, the balsams and turpentine have had wonderful effects in a short time, they have put a stop to the frequent discharges; relieved all the symptoms, particularly the tenesmus, which is often so distressing, and restored, completely the tone of the Intestines.

The coccolle is very useful in this form of Dysentery; as also are gum kino, logwood, the root of the running briar, and some others.

If the fever attending the Dysentery should take on an Intermittent form, it should be treated with the Peruvian Bark, China Slender, and such other medicines, as are adapted to the form of the fever.

If the fever be of the Typhoid kind, cordials and stimulants must be given; such as the serpentaria,

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 your recovery
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 to go on with
 your work.
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 Sir,
 Yours,
 J. B.

velutis, albulis, sandorum, camplos, and the like.

As the disease is very liable to relapse, persons recovering from it, should observe the greatest caution, and regularity in their diet, and should go warmly clothed.

I have now concluded this short, and imperfect essay, but I should consider myself wanting in gratitude, were I not to avail myself of the present occasion, to offer my grateful acknowledgments, for the many favours extended to me, by you, Gentlemen, who preside in this University, (the pectus solinus of our medical knowledge), and who, by your learned disquisitions, instill into the minds of your auditors, those salutary precepts, by which they are enabled to combat the power of Disease, and snatch from impending destruction, so many of our fellow-creatures.

That you may, in private life, long enjoy the blessings of health, and domestic happiness; and that your professional labours may continue, as hitherto, to advance the reputation and usefulness of this celebrated Seat of Sciences is the ardent wish of the Author.

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